



Uinta County School District No. Four

129 W. 2nd Street / PO Box 130

Mountain View, WY 82939

(307) 782-3377 Ext. 4201

CLASSIFIED STAFF APPLICATION FOR EMPLOYMENT

All Classified staff employed by Uinta County School District No. Four are employed as employees at-will and nothing contained herein nor in the policies of the school district shall be construed to alter that employment status. Employees of Uinta County School District No. Four are required to be familiar with and comply with the policies and procedures of the District. A copy of the policy manual is contained in the individual school buildings, the central administration office and on the District's website, www.uinta4.com. NOTE: As a condition of employment, you will be required to be FINGERPRINTED and submit verification of your legal right to work in the United States. Any expenses incurred to fulfill these conditions of employment are to be borne by the employee. In order to be considered for the position, all portions of the application must be filled out. Please use pen or type.

LAST NAME	FIRST NAME	MIDDLE INITIAL	TODAY'S DATE
MAILING ADDRESS		CITY	STATE
		ZIP CODE	
HOME PHONE NUMBER	CELL PHONE NUMBER	WORK PHONE NUMBER	
E-MAIL ADDRESS (optional)			

Position(s) for which you wish to be considered (check all that apply):

- | | | |
|---|---|---|
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Crossing Guard | <input type="checkbox"/> Payroll Clerk |
| <input type="checkbox"/> Lawn/Groundskeeper | <input type="checkbox"/> Food Services | <input type="checkbox"/> Accounting Clerk |
| <input type="checkbox"/> Custodian/Janitorial | <input type="checkbox"/> Secretary/Clerical | <input type="checkbox"/> Substitute Teacher |
| <input type="checkbox"/> Bus Driver | <input type="checkbox"/> ParaEducator | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Bus Assistant | <input type="checkbox"/> Media ParaEducator | |

Check type(s) of position(s) you would accept:

- ☐ Full-Time ☐ Part-Time ☐ Substitute

Are you a United States citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, Alien Registration #:	
Have you served in the U.S. Military?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Branch of Service:	
		DATE(S) OF SERVICE	
Have you ever been employed by Uinta 4 before:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, indicate:			
DATE(S) OF EMPLOYMENT	DEPARTMENT/SCHOOL	POSITION	

EDUCATION AND TRAINING

Check the appropriate box if you possess any of the following:

- ☐ High School Diploma ☐ GED® Certificate
- ☐ College/University

SCHOOL NAME/LOCATION	YEARS COMPLETED	MAJOR	DEGREE
<input type="checkbox"/> Graduate/Professional			
SCHOOL NAME/LOCATION	YEARS COMPLETED	MAJOR	DEGREE

List any other business, trade or special training that relates to the position (indicate location and dates):

SKILLS AND CERTIFICATIONS

Do you have a valid Driver's License?

☐ Yes

☐ No

If yes:

STATE

EXPIRATION DATE

Summarize special skills, qualifications and equipment used, and indicate foreign language(s) you speak, read and/or write fluently:

List any other skills, abilities, experience which would qualify you for this position:

WORK EXPERIENCE

Begin with the most recent experience and account for all time during the last ten years. Also, list any prior experience relevant to the position for which you are applying. Unless specifically excluded by minimum job requirements, verifiable voluntary experience may be considered if job-related. Résumés may be attached, but do not take the place of the completed application form. Use additional sheets, if necessary.

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START DATE	END DATE	POSITION TITLE	SUPERVISOR'S NAME	
YEARS EXPERIENCE	MONTHS EXPERIENCE	HOURS WORKED/WEEK	EMPLOYER'S NAME	EMPLOYER'S PHONE NUMBER
<input type="checkbox"/> Full-Time		<input type="checkbox"/> Part-Time	<input type="checkbox"/> Volunteer	EMPLOYER'S MAILING ADDRESS, CITY, STATE
DUTIES PERFORMED				
WAGE/SALARY	per	per	REASON FOR LEAVING	
HOUR, WEEK, MONTH, ETC.				

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START DATE	END DATE	POSITION TITLE	SUPERVISOR'S NAME	
YEARS EXPERIENCE	MONTHS EXPERIENCE	HOURS WORKED/WEEK	EMPLOYER'S NAME	EMPLOYER'S PHONE NUMBER
<input type="checkbox"/> Full-Time		<input type="checkbox"/> Part-Time	<input type="checkbox"/> Volunteer	EMPLOYER'S MAILING ADDRESS, CITY, STATE
DUTIES PERFORMED				
WAGE/SALARY	per	per	REASON FOR LEAVING	
HOUR, MONTH, etc.				

3

START DATE	END DATE	POSITION TITLE	SUPERVISOR'S NAME	
YEARS EXPERIENCE	MONTHS EXPERIENCE	HOURS WORKED/WEEK	EMPLOYER'S NAME	EMPLOYER'S PHONE NUMBER
<input type="checkbox"/> Full-Time		<input type="checkbox"/> Part-Time	<input type="checkbox"/> Volunteer	EMPLOYER'S MAILING ADDRESS, CITY, STATE
DUTIES PERFORMED				
WAGE/SALARY	per	per	REASON FOR LEAVING	
HOUR, MONTH, etc.				

Have you ever been discharged or asked to resign by a previous employer?

☐ Yes

☐ No

If yes, please explain:

APPLICANT'S LAST NAME

FIRST NAME

MIDDLE INITIAL

TODAY'S DATE

PERSONAL/PROFESSIONAL REFERENCES

List three persons, other than relatives, who have first-hand knowledge of your work experience.

NAME	ADDRESS	PHONE NUMBER	RELATIONSHIP	LENGTH OF ACQUAINTANCE

For reference purposes, do we have your consent to contact any or all the employers or references listed on this application? ☐ Yes ☐ No

If no, state reason: _____

PERSONAL DATA

1. Present Position: _____

2. Present Salary: \$ _____

3. Why do you wish to leave your present position?

4. Have you ever been convicted of or pled *nolo contendere* to or otherwise received a deferred sentence in consideration of fulfilling the terms of probation as to any felony or any crime relating to child abuse or neglect, or any crime relating to sexual abuse or a minor?

☐ Yes ☐ No If yes, please explain: _____

The district will review the nature of the offense, the date of the offense and the relationship between the offense and the position for which the person is applying before a determination concerning impact upon consideration for employment.

5. Will you consent to the release of any and all information or records maintained by the Wyoming Department of Family Services concerning you and sign the appropriate release so that such records may be released to Uinta County School District No. Four?

☐ Yes ☐ No

6. Pursuant to the provisions of W.S. §21-7-401, any employee who is to be hired by the school district on or after July 1, 1996, who may have access to minors, is required to submit to fingerprinting and provide such other information as is necessary for the School District to require a national criminal history background check. **Do you consent to provide the appropriate fingerprinting and other information for Uinta County School District No. Four to conduct a criminal background check?**

☐ Yes ☐ No

7. In the event that you are called to work at Uinta 4 prior to completing payroll paperwork, the following information enables the Payroll Office to expedite your transition to the Uinta 4 team:

Last 5 digits of your SSN: _____

*This data will become part of your Employee ID and is utilized by the District's time clock system. Providing this information here is **optional**; it has no impact on the District's employment decisions.*

**** YOUR APPLICATION IS NOT COMPLETE UNTIL YOU SIGN AND DATE THE RELEASE STATEMENT ON THE NEXT PAGE. ****

In order to be considered a complete application for employment, the authorization and application statement below must be signed, dated and notarized as indicated.
A Notary Public is typically available at the Uinta 4 Central Office for your convenience.

AUTHORIZATION FOR RELEASE OF INFORMATION AND APPLICATION STATEMENT

I, the undersigned applicant/employee, hereby expressly authorize Uinta County School District No. Four, its authorized representatives thereof, to make any investigation in my personal or employment history including, but not limited to, investigation of my personal or employment history, federal and/or state criminal, law enforcement or traffic records. I specifically authorize those persons who have access to such information to make copies of all prior personal and employment history records and the records of any and all law enforcement agencies, courts and social service agencies. I further authorize representatives of any agency contacted by agents or representatives of Uinta County School District No. Four to release and make copies of such records in connection with my application of employment with Uinta County School District No. Four. I further authorize any former employer, person, firm, corporation, credit agency, administrative body or governmental or law enforcement agency, Department of Family Services, Department of Criminal Investigation or other entity, to give to said School District as set forth above, any information, oral or written, they may have regarding me. In consideration of the review of my employment application by said School District and its authorized agents as set forth above, I do hereby release and agree to hold harmless Uinta County School District No. Four any person, entity or agency providing them with information from any liability or claims resulting from the release of this information. An investigative consumer report concerning your credit history may be made as a part of the employment process.

I certify that all statements made herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I further agree to be fingerprinted and, upon employment, to furnish proof of age and employment eligibility. If necessary for employment in a specific position, you may be required to have a physical examination, drug screen or to provide evidence of citizenship.

TODAY'S DATE

APPLICANT'S SIGNATURE
(TO BE SIGNED IN THE PRESENCE OF A NOTARY PUBLIC)

NOTARY OATH OR VERIFICATION

Before me, _____

PRINT FIRST AND LAST NAME OF NOTARY

a Notary Public in and for Uinta County,
State of Wyoming, personally appeared

PRINT FIRST AND LAST NAME OF APPLICANT

and he/she being first duly sworn by
me upon his/her oath, says that the facts
stated in the foregoing instrument are true
and correct.

Witness my hand and official seal this

_____ day of _____,

20_____.

SIGNATURE OF NOTARY PUBLIC

My commission expires:

DATE

Applicants for employment are hereby notified that Uinta County School District No. Four does not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status in admission or access to, treatment, or employment in its programs and activities. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training. Inquiries concerning Title VI, Title IX and Section 504 may be referred to the Superintendent of Schools or the Title IX Officer, Uinta County School District No. Four; the Wyoming Department of Education, Office of Civil Rights Coordinator, 2nd Floor Hathaway Building, Cheyenne, WY 82002; or to the Office for Civil Rights, U.S. Department of Education, 1961 Stout Street, Denver, CO 80294.

(Note: This application will be kept only for one (1) year; however, each time a new position opens up for which you desire to be considered, you must notify the school or Central Office of your intent to reactivate your application, or, if more than one year has passed, submit a new application.)